

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Connective Mount INC, c/o United
States Corporation Agents Inc,
Statutory Agent
500 N Rainbow Blvd, Ste 300 A
Las Vegas, NV 89017
Re: Case No. 2:22-CV-2700



9590 9402 5742 0003 5303 08

2. Article Number (Transfer from service label)

7018 1830 0000 2705 8143

X *P. Linden*

- ☒ Agent
☐ Addressee

B. Received by (Printed Name)

P. Linden

C. Date of Delivery

9/23/22

- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

USPS TRACKING #

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9590 9402 5742 0003 5303 08

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

- Sender: Please print your name, address, and ZIP+4® in this box•

Clerk, United States District Court,
Southern District of Ohio
85 Marconi Blvd
Room 121
Columbus, OH 43215

FILED
RICHARD W. NAGEL
CLERK OF COURT
AUG 29 PM 3:04
U.S. DISTRICT COURT
SOUTHERN DIST. OHIO
ST. DIV. COLUMBUS

